DO/EO BIBLIOGRAPHIC DATA ENTRY

RECEIPT DATE: 09 / 29 / 0.0SERIAL NUMBER: 09 / 647300 IA NUMBER: PCT/ IB00 / 00189 IA FILING DATE: 02 / 22 / 0.0FAMILY NAME: SILAGHI DELAY WAIVED (Y/N): N GIVEN NAME: DEMAND RECEIVED (Y/N): N 02 / 25 / PRIORITY DATE: 99 PRIORITY CLAIMED (Y/N): US DESIGNATED ONLY (Y/N): NO BASIC FEE (Y/N): N M ATTORNEY DOCKET NUMBER: COUNTRY: CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 000000000 FAX

NAME: SILAGHI ANNE MELODY

STREET: RUE DE LA BLANCHERIE 13

CITY: CH 1022 CHAVANNES PRES RE

STATE/COUNTRY: CHX ZIP:

EMAIL:

APPLICATION TITLES:

SPEECH RECOGNITION AND SIGNAL ANALYSIS BY STRAIGHT SEARCH OF SUBSQUENCES WITH MAXIMAL CONFIDENCE MEASURE

TAB TO LAST POSITION, PUSH SEND